PATENT APPLICATION FEE DETERMINATION RECORD Effective October 1, 2003

Application or Docket Number

Lifective October 1, 2003								·	1081	52	5/	
		CLAIMS A	SMA			SMALL I	ENTITY	OF		R THAN ENTITY		
∏ T	OTAL CLAIM	TAL CLAIMS 44				R/			FEE	7	RATE	FEE
F	OR		NUMBE	NUMBER FILED		NUMBER EXTRA		BASIC FE	E 385.00	OR	BASIC FEE	1
Ţ	OTAL CHARGE	EABLE CLAIMS	44. n	ninus 20=	· 24			X\$ 9=		OR	X\$18=	, , , , , , , , , , , , , , , , , , ,
I}—	DEPENDENT (<u> </u>	minus 3 ±	* 3			X43=	·	OR	X86=	
M	ULTIPLE DEPE	ENDENT CLAIM F	PRESENT	RESENT				+145=		OR	+290=	
• 1	f the differenc	e in column 1 is	less than:	ess than zero, enter "0" in column 2			L	TOTAL	17'30	OR	TOTAL	
	((Column 3)		SMALL	ENTITY	OTHER THAN SMALL ENTITY						
ENT A	·	(Column 1) CLAIMS REMAINING AFTER AMENDMENT		(Colun HIGHI NUME PREVIO PAID F	ST BER USLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE	OR	RATE	ADDI- TIONAI FEE
AMENDMENT	Total	*	Minus	***		=		X\$ 9=		OR	X\$18=	
AME	Independent	1.	Minus	***		=	Γ	X43=		OR	X86=	
L	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							+145=		OR	+290=	
11/3, 20, 28, 33, 78,								TOTAL DIT. FEE		4	. TOTAL ADDIT. FEE	
		(Column 1)		(Colum	n ⁽ 2)	(Column 3)						•
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		HIGHE NUMB PREVIOU PAID F	ER USLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	** 3	•	= .		X\$ 9=		OR	X\$18=	
AME	Independent		Minus	***		= .	F	X43= ·	•	OR	X86=	
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							4.5			.000	
·	**							145=		OR	+290= TOTAL	
								DIT. FEE		OR.	ODIT. FEEL	<u> </u>
_		(Column 1)	(Column 3)	٠					. :			
AMENDMENT C		REMAINING AFTER AMENDMENT		HIGHE NUMBE PREVIOU PAID FO	R	PRESENT EXTRA	F	RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	•	Minus	**		Ξ,	>	(\$ 9=		OR	X\$18=	Alax.
	Independent	•	Minus	***		=	1	(43=		. 1	X86=	
	FIRST PRESE	NTATION OF MU	LTIPLE DE	PENDENT C	MIAJ		1			OR		
. - H	the entry in colur	L	145=		OR	+290=						
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3. ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." ***OR ADDIT. FEE												
1	he *Highest Num	ber Previously Paid	For (Total or	Independent) is the	highest number	found	in the appr	opriate box	in colu	mn 1.	